in the gray matter of the spinal cord and of some of the cranial nerve nuclei in the medulla and midbrain. In the Vienna type of encephalitis the process is most intense throughout the basal ganglia and substantia nigra.

tense throughout the basal ganglia and substantia nigra.

The author concluded that the differentiation of the various types of virus encephalitis must be based on the distribution of the lesions rather than on their histopathological characteristics.

F. A. Jaffé

Ulcers of the Upper Part of the Gastro-intestinal Tract Associated with Acute Damage of the Brain. Wyatt, J. P. and Khoo, P. N.: Arch. Path., 47: 110, 1949

This is a report of 4 cases in 3 of which head injury occurred and in the 4th of which death occurred following anæsthesia with ethyl chloride and ether and tonsillectomy. In the traumatic cases extensive hæmorrhage into the brain substance involved the frontal and temporal lobes and the island of Reil. In 2 cases, there was hæmorrhage in the hypothalamus. In the 4th case there was generalized degeneration of neurones in both the cortical and subcortical centres. Associated with the brain lesions were multiple acute ulcers of the stomach and duodenum. In 2 of the traumatic cases there was ulceration and perforation of the esophagus near the cardiac end of the stomach. The lesions in all the cases but one showed definite evidence of an inflammatory response to the ulceration indicating their ante-mortem nature. The perforations of the esophagus were not suspected because of the comatose condition of the patients following their injuries. The senior author examined the tissues of 210 cases of head injury in England during the war without finding gastro-intestinal ulcer-ation. This is attributed to the fact that the patients did not live long enough to develop the lesions in contrast to the present group of patients who lived from 1½ to 5 days following the cerebral injury. It is of interest that the injury to the brain did not have to be located in the hypothalamus to result in the lesions of the stomach and duodenum.

S. D. KOBERNICK

The Mole as a Possible Reservoir of Poliomyelitis. Rector, L. E.: Arch. Path., 47: 366, 1949.

The author suggests four a priori concepts concerning any animal that may possibly be a reservoir for the virus of poliomyelitis: (1) it will be found throughout the temperate and tropical zones; (2) it will account for the frequently observed tendency of the disease to start and to have a higher incidence in rural than in urban populations; (3) it will account for the seasonal tendency of the disease in man; (4) it will be so inconspicuous as to have escaped consideration to date. Having decided that the mole might well fit in with these concepts as a vector of the disease, its susceptibility to the virus of poliomyelitis was then tested. Most of the tested moles showed muscular paralysis of varying degree and died within one to 139 days after inoculation. Pathologically none of the lesions characteristic of human poliomyelitis were present, and attempts to pass the virus to monkeys were unsuccessful.

Chronic Inflammatory Lesions of Skeletal Muscle in Rheumatoid Arthritis and in Other Diseases. Ogryzlo, M. A.: Arch. Path., 46: 301, 1948.

A limited number of sections of skeletal muscle from a variety of cases, including examples of the collagen disease group, were studied. The author concludes that inflammatory lesions of the type recently described in patients with rheumatoid arthritis may be found in a variety of diseases. He regards the lesions as non-specific in character and showing no relationship to the degree of degenerative change present in the muscle.

Torrence P. B. Payne

Sarcoidosis Involving the Heart. Scotti, T. M. and McKeown, C. E.: Arch. Path., 46: 289, 1948.

The authors report a case of sarcoidosis with involvement of the myocardium and sudden death in a 26 year old negro man. Reviewing the literature they find 12 previously reported autopsied cases of sarcoid of the myocardium. Their case is the 5th reported case of death due to myocardial involvement and the 3rd case of sudden death. The paper is interesting since it brings out the point that death may occur from sarcoid itself when it involves some vital structure, rather than from the development of tuberculosis, as so often happens. It is well known, of course, that sarcoid not infrequently involves the myocardium.

TORRENCE P. B. PAYNE

OBITUARIES

A. E. Archer, M.D.

AN APPRECIATION

Albert Ernest Archer died as he had lived, with equanimity, imperturbed by the lesser affairs of men. He had an abiding faith in the Master of the Universe, and a charitable attitude toward the weaknesses of his fellow men. He felt honoured in being a member of the medical profession and during his life time did much to maintain the dignity and prestige of the profession he loved so much.

At the time of his death I had known him intimately for more than twenty-seven years. Words given to Marcus Antonius to describe Brutus might have been written to describe Dr. Archer,

"His life was gentle, and the elements
So mixed in him, that Nature might rise up,
And say to all the world, 'This was a Man'.'

His patient was always his first consideration, and time, roads, or weather, in the horse and buggy days, or the pressure of "things" in later years did not alter that characteristic of his practice. His judgment was of the first order and his faculty of arriving at a correct diagnosis in the obscure case bordered on the uncanny. His ability as a surgeon was well known to his confrères. He was granted a Fellowship in both the Canadian and American College of Surgeons in recognition of this ability. An old man weeping quietly in a hospital ward or hundreds standing outside the church at the time of his funeral suggest that there was something more to his life than the technical ability of a good surgeon or the mature judgment of a practitioner. He was a friend.

This is not the time nor the place to catalogue all the useful activities of the life just completed. He gave endless hours of thought and effort to improving the welfare of the medical profession. His knowledge of the economics of the practice of medicine was second to none in our Dominion and probably equalled that of any man of his time. In medical and hospital circles in his own Province and later in the Federal field he had been an earnest student and leader for many years. He was President of the Canadian Medical Association in 1942. During the war years he was a member of the Committee of Seven and of the Procurement and Assignment Board. Later he was adviser in Economics to the Canadian Medical Association. In fulfilling his duties in connection with these varied responsibilities he crossed this continent many times. He lived a full and useful life and was possessed of abundant energy which he utilized to the full in doing good. He was twice mentioned in the King's honour list, first the O.B.E. and later the C.B.E.

One need not say of such a man that he was a beloved husband and a good father. His home life meant much to him and he was never happier than when he was entertaining his friends. It was in these pleasant surroundings that one appreciated his keen sense of humour. He grew up in the parsonage and believed and practised Christian principles all his life. The United Church has lost a Christian gentleman.

A. E. Archer had many of the characteristics of another great Canadian doctor the centenary of whose birth we celebrate this year. Men like these have led Canadian Medicine to where it is today. In paying this tribute to the life of an associate, teacher and friend may I suggest that he would have said to us all-

"To you from failing hands we throw the torch, Be yours to hold it high."

MORLEY A. R. YOUNG

Dr. Cameron Hugh Bayne died on June 4 at his home in Sarnia, Ont., aged 51 years. Surviving are his widow, his mother, three sons, a brother, and a

Dr. Gordon S. Draeseke, aged 68, well-known specialist in diseases of the eye, ear, nose and throat, died suddenly in Vancouver on June 12. He had practised here some thirty-eight years. He served overseas in the Great War of 1914-18, attaining the rank of Colonel in the C.A.M.C. He was chief of the eye, ear, nose and throat departments of the Van-couver General and Shaughnessy Hospitals for many years. He was born in Dundas, Ont.

Le Dr François A. Dumas, 62 ans, et son petit-fils de deux ans, de Chicoutimi, se sont noyés le 15 mai lorsque l'automobile dans lequel ils prenaient place plongea dans le lac Jacques Cartier, dans le parc des Laurentides. Le Dr Dumas quitta Hull il y a environ 15 ans. Il pratiqua ici pendant longtemps la médecine

Dr. J. Ernest Gendreau, aged 69, founder and director of the Radium Institute of Cancer Research and professor of chemistry at University of Montreal, died at the Ste. Jeanne d'Arc Hospital on June 5. He had been ill for several months. Born in Coaticook, Que., in 1879, Dr. Gendreau was educated at St. Hyacinthe Seminary and Jesuit College. Later he specialized in science and medicine and studied in Paris. He founded the Radium Institute on his return from Europe and was named to the teaching staff of the University of Montreal.

Dr. Dawson Graham, aged 80, the first medical doctor to practice in Drumheller, Alta., died in Vancouver on May 19. He came to Drumheller from Stettler in 1912 when this city was a hamlet. This was a year after the first test hole was sunk to locate domestic coal. He called on his first patients by horse and buggy. A graduate of Queen's University and the University of Manitoba, he practised in Manitoba before moving to Stettler. Surviving are his widow, two sons and two daughters.

Dr. Cecil Hazen Hankinson, died on May 19 after being seriously ill for more than a year. In spite of his being seriously in for more than a year. In spite of his illness, he had continued active in his large practice at Prince Rupert until three months ago. Born in St. Thomas, Ont., he attended Balaclava Street School and the Collegiate Institute, deciding upon graduation to study as a medical missionary and enrolling at the University of Edmonton. He had returned from Edmonton one summer during the years of the First World War to preach at Central United (then Methodist) Church when he decided to forego the missionary field and devote his full time to the study and practice of medicine. He then attended McGill University at Montreal, graduating in 1919. About 1930, Dr. Hankinson moved to Prince Rupert where, only a little more than a year ago, he built his own private clinic, one of the most modern on the West Coast. He was a member of the Canadian Medical Association and of medical associations in the United States. He was active in both Masonic and Shrine circles and was a member of the United Church.

In addition to his regular practice, he served as doctor for the Canadian National Railway at Prince Rupert.

He is survived by his widow, five sons, a daughter, two brothers and two sisters.

Dr. S. J. W. Horne, aged 52, died on June 11 at the Soldiers' Memorial Hospital, Orillia, Ont., after a short illness. He was a native of Wolfe Island, where he attended Sydenham High School. Graduating from Queen's University Medical School in 1918, he served overseas in the Canadian Army Medical Corps, holding the rank of captain. At the end of the war he was appointed to the staff of Westminster Hospital at London, Ont., where he remained until 1928 when he joined the staff of the Ontario Hospital at Orillia. He was appointed superintendent in 1931, a position he held until his death.

A member of St. Paul's United Church, he also took an active part in the Orillia Kiwanis Club and was a member of the Masonic Order. He was a director of the Orillia Y.M.C.A. and a past president of the local branch of the Canadian Red Cross. Surviving are his widow, his mother, a daughter and a son.

Dr. Gordon James, aged 50, retired health officer at Britannia Mines, B.C., died of a heart attack on May 18. He was born in Leal, North Dakota, and came to B.C. in 1909. He studied medicine at the University of Toronto. He leaves three sisters and a brother.

Dr. Rosamond Mary Butler Leacock died suddenly on May 28, at her home in Toronto. She was 65. She had been the assistant to Dr. I. H. Erb, provincial pathologist, since 1947. For 19 years, prior to that time, she had been Dr. Erb's assistant in the bacteriology department at the Hospital for Sick Children.

Attending McGill University for one year, she continued her studies at the University of Toronto, graduating in medicine in 1908. She did postgraduate work for a year at Johns Hopkins University, and then went to the Detroit Children's Hospital. This was followed by a period when she was on the staffs of various hospital. pitals in England and on the continent. In 1912, Dr. Leacock went to Calgary, where she opened a general practice. Interested in pathology, she gave up her practice and became pathologist at the Calgary General Hospital and the Holy Cross Hospital. At the same time, she opened, owned and operated the Calgary Clinical Laboratory. In 1928, she came to Toronto where she became Dr. Erb's assistant.

A graduate of the Toronto Conservatory of Music, Dr. Leacock maintained a life-long interest in music. her younger days, she was an all-round athlete. She was an ardent tennis player, captain of basketball teams and a lover of racing. This year's King's Plate at the Woodbine race track was the first she had missed in 20 years. Dr. Leacock was a member of the Anglican Church, the Canadian Medical Association and the Toronto Academy of Medicine. Surviving are three brothers and two sisters. She was a sister of the late Stephen Leacock.

Dr. William Albert McClelland died on June 10 in Dr. William Albert McClelland died on June 10 in St. Joseph's Hospital after 30 years of service as a general practitioner in Toronto. He was severely burned when his bedclothes caught fire from a cigarette. Dr. McClelland was born in Grand Valley. He graduated from the University of Toronto Medical School in 1907, with a name on the Varsity hockey team and a brilliant scholastic showing. During the Frst World War he served as medical officer in England, Malta and Salonika. After the war he settled in Toronto, and kept up his athletics through lacrosse and handball. He leaves his widow, a daughter, a son, a brother and a sister. widow, a daughter, a son, a brother and a sister.

Dr. M. E. McGarry, aged 68, died in Cheticamp, N.S., on June 11. He had been in ill health for somé time.

Dr. Neil B. McGillivray, aged 38, chief of the medical staff of Wellesley Hospital, died suddenly on June 27, at his home in Toronto, from a heart condition. A veteran of World War II, Dr. McGillivray enlisted with the 15th Canadian General Hospital and later transferred to No. 9 General Hospital, England where he was chief of the medical staff. He also served in North Africa and Italy and held the rank of lieutenant-colonel. Born in Whitby, he received his early education at Upper Canada College and graduated in medicine from the University of Toronto in 1936. During his student days, Dr. McGillivray spent his summers working at the Grenfell Mission in Labrador. Following graduation, he was senior intern at the Toronto General Hospital and then spent some years in England where he received his M.R.C.P.(Lond.). Upon his return he obtained his F.R.C.P.[C.]. He is survived by his wife, his mother and a sister.

Dr. John Robert Warburton Nicholson, long connected with the Department of Veterans' Affairs, died on June 3 at the age of 69 in the Winnipeg General Hospital. Born at Carlisle, England, he came with his parents in 1889 to the Dauphin area in Manitoba. He was educated at Wesley College, Winnipeg, and graduated in medicine from Manitoba Medical College in 1914. Two years later he joined the 12th Field Ambulance with the rank of captain. In August, 1916, his unit went to France as part of the Fourth Canadian Division. After service in France and Belgium, he returned to Canada in 1917 serving until April, 1919. He then joined the 3rd Field Ambulance (non-permanent militia) and rose to be Lieut.-Col. of the Unit in 1923.

He helped to organize the Soldier's Civil Re-establishment in 1919 and served with the Department of Veterans' Affairs until the time of his death, as chief medical consultant. He took a keen interest in the welfare of the veterans of both wars. His hobbies were golf, curling, and nature study. He was a member of Fort Rouge United Church and of Prince Rupert Lodge A.F. & A.M. He is survived by his widow, six brothers and one sister.

Dr. H. B. Powell, born in Whitby, Ont., died recently, at Bilox, Mississippi, at the age of 83 years. He was a veteran of the first World War and served in the Spanish American War. He is survived by his widow and two sisters.

Dr. C. Wesley Prowd, aged 66, died on June 9 of a heart attack, in St. Paul's Hospital, Vancouver. Director of radiology at St. Paul's Hospital for 39 years, he was twice president of the Canadian Radiological Society and a former president of the Vancouver Medical Association. Noted for his work in cancer research, he brought the first supply of radium to the Pacific Coast in 1915. Born in Owen Sound, Ont., he came to Vancouver in 1908, when he graduated in medicine from the University of Toronto. He is survived by his widow, two daughters and two stepsons.

Dr. Bernard Emms Read, director of the Lester Institute of Scientific Research in Shanghai, a former associate of McGill University, died recently in Shanghai. He was editor of the Royal Asiatic Magazine, and collaborated with the late Sir Frederick Banting in research work on insulin. He was noted for his research work in Oriental medicines, and for the discovery of ephedrine, used in the treatment of asthma. A native of Brighton, England, he spent many years in the Far East. He was especially noted for his work among refugees in China during the Japanese war, carrying out research experiments in food values which proved of great use during the late war to the United States, in the Far East and in Europe. Dr. Read was a graduate of Yale University and an associate of John Hopkins as well as of McGill University, and won many honours from medical and scientific

societies in Europe and America. He is survived by his widow and son, two brothers and three sisters.

Dr. Lewis L. Reford, well-known Montreal surgeon, died on May 31 at the Western Division of the Montreal General Hospital after a lengthy illness. He was 71. Educated in Montreal at private schools and at McGill University, he graduated in arts in 1900 and in medicine in 1904. After interning for two years at Montreal General Hospital, he spent five years in postgraduate studies at John's Hopkins Hospital, in Baltimore, under the late Dr. Harvey Cushing, and later at several surgical centres in Germany. In 1911, he was appointed to the surgical staff of the Royal Victoria Hospital. During the First World War, he served overseas from 1915 to 1919 in the Royal Canadian Army Medical Corps, being an original officer of No. 3 Canadian General Hospital (McGill). Throughout his life, Dr. Reford maintained an interest in McGill University, and continued a close association with the McGill Rugby Football Club, the Red Birds Ski Club, University and Graduates' Financial Campaigns, and the Zeta Psi Fraternity. He had in addition a great interest in neuro-surgery and was one of the first consulted when it was proposed that a centre for the study of neurology and neuro-surgery be established in Montreal. Subsequently he was one of those whose generosity led to the building of the Montreal Neurological Institute.

He had a fine entomological collection, built up with his friend the late Dwight W. Brainerd, and he was a supporter of the Quebec Association for the Protection of Fish and Game. Known as one of Canada's foremost philatelists, his interest in his famous collection of rare Canadian stamps never waned; and his wide knowledge of plants and flowers was manifested in his own gardens and in the development of the Montreal Botanical Gardens, of which he was, until recently, a member of the board. He was a member of the St. Paul's Masonic Lodge and of the Mount Royal Club, the University Club, and the Kanawaki Golf Club. Surviving are his widow, one brother and two sisters.

Dr. Victoria Reid Silverthorn died on June 17 after a lengthy illness at her home in Toronto. Wife of the late Dr. Gideon Silverthorn, she graduated in arts from Queen's University in 1900. Four years later she obtained her medical degree from the same university and interned at the Women's Hospital in Boston. In 1905 she established her practice in Toronto. For three years during the First World War, Dr. Reid was on the staff of the London General Hospital, London, Eng. She was a counsellor at Queen's University for many years. She was a member of St. Matthew's Anglican Church, and a former member of the Toronto Academy of Medicine and the University Women's Club. Surviving are three sisters and a brother.

Dr. Frederick F. Tisdall

AN APPRECIATION

Many medical men in Canada must have felt a personal loss in the passing of Dr. Fred Tisdall. I leave it to others to give an account of his high professional qualities and achievements. To me, just a young graduate, as well as to many others, his untimely passing has been a source of great grief. I first had the honour of working with him a year ago, when he was undertaking a dietetic survey in Newfoundland. His profound knowledge, and his most unassuming manner, endeared him to all with whom he came in contact. The great wisdom and qualities of mind which were his, he carried lightly. He was always willing and only too glad to lend a helping hand and to impart knowledge to those beneath him. His dignified and upright figure and his genial and lovable personality will be forever missed by all those who knew him. No one who came into close contact

with him, will forget his great erudition, his wide culture and his fund of anecdotes.

Dr. Tisdall was indeed a source of inspiration, a philosopher and friend to those of us most junior in the profession:

"And he would have some gentle word to say,
Some kindly deed to do; for kindly thought
Was warp and woof of which his life was wrought."

With his passing the medical world is bereft of one of its great philanthropists, whose humanitarian sphere of work was not bounded by national frontiers. It varied from caring for prisoners-of-war, to studying methods for improving the living conditions of the Indians in the Canadian North. With his death a great master of the art and science of medicine has gone from us and has departed to join the noble ranks of Osler, and other great physicians of the past. T.F.M.

Dr. R. B. E. Wilson, aged 54, a practising physician in Uxbridge, Ont., for the last 28 years, died on June 16. He was born in Woodstock and received his early education there. After returning from overseas service in the First World War, he completed his education at the University of Manitoba.

NEWS ITEMS

Alberta

The Alberta Orthopædic Society held its second annual meeting in Edmonton on May 18, a full attendance was noted. The executive members were elected as follows; President—Dr. H. Mewburn, Vice-President—Dr. Gordon Townsend, Secretary-Treasurer—Dr. Gordon Wilson.

Dr. Harvey D. Hebb has opened a surgical practice in the City of Edmonton.

Dr. H. E. Duggan of the Department of Radiology of the University Hospital was successful in passing the American Board of X-ray and Radium Therapy at the recent examinations held in Atlantic City. During the war Dr. Duggan served in R.C.A.M.C.

Dr. W. S. Armstrong of Edmonton has returned from Baltimore where he attended the Eye Department of Johns Hopkins Hospital.

Many of the Alberta medical men are enjoying their holidays at Banff and Jasper, since excellent roads have been built to these resorts motoring is a pleasure, the average time of travel from the larger centres being from two to six hours.

Dr. R. E. Jesperson had the misfortune to fracture his arm recently. Dr. Jesperson is associated with the Allin Clinic of Edmonton.

The new building for the Department of Pathology is well under way and is situated just West of the University hospital. The steel for the new wing of the hospital has been completed.

W. CARLETON WHITESIDE

British Columbia

Poliomyelitis is beginning to rear its ugly head again in British Columbia. At present there are seven recognized cases in Vancouver, and there is a good deal of upper respiratory infection amongst children.

There has been a good deal of measles in Vancouver lately. The Medical Health Officer, Dr. Stewart Murray, reports that there are "two types" of the disease. This is borne out by the experience of practitioners. One type

seems to be very short-lived, with an almost fleeting rash, and few symptoms. It needs the Koplik's mouth spots to confirm one in one's diagnosis of the disease.

The question of hospital construction has been engaging the attention of the civic government of Vancouver lately. Plans are in existence for a considerable extension of the Vancouver General Hospital, by some eight hundred beds, but a recent resolution sent to the City Council by the Vancouver Medical Association urges decentralization, and the building of hospital units in districts according to population and local needs.

There is at the present moment a very grave shortage of nurses in British Columbia, especially in the hospitals, where there is danger, at least in some of them, that wards will have to be closed temporarily, as they cannot be staffed. This is partly due, of course, to the fact that summer holidays curtail staffs, but it is also due, to some extent at least, to the fact that nursing schools cannot accommodate students. The number of girls applying for training is in excess of the number for whom residential accommodation can be supplied. The Vancouver General Hospital has in process of construction a new Nurses' Home—but this is being built in stages, and the first unit will not be able to take care of any increase.

At a recent convention of the North West Veterinary Association held in Vancouver, and attended by representatives from both the United States and Canada, the question of brucellosis amongst cattle came up for discussion. The matter is, of course, of great interest to us as medical men, on account of its relation to undulant fever, which is quite prevalent in parts of British Columbia. The consensus amongst these men seemed to be that there was not a sufficiently organized system of herd vaccination. Many farmers and stockmen were inadequately equipped to vaccinate their herds; many purchased sera of very doubtful value, in some cases of no value at all. They urged standardization of methods, and a campaign to wipe out this disease, which has cost the cattle industry of British Columbia vast sums. From our point of view, this is a very sound suggestion, and we can only hope that it will be implemented by government action in the near future.

Federal Health Grants are beginning to play an important part in various Health Surveys in this Province. As an instance, we may cite a province-wide survey of crippling diseases of children, now being carried on, under the chairmanship of Dr. Donald Patterson, Director of the Children's Health Centre in Vancouver. A question-naire has been drawn up by a large group of men who are specialists in various departments of medicine, including orthopædics and pædiatrics, mental diseases, and the division of vital statistics. This questionnaire is being sent to all medical men in the Province.

Tuberculosis, mental hygiene, cancer and venereal disease, public health and professional training, as well as hospital construction, all come within the purview of these grants as well.

J. H. MacDermot

Manitoba

On May 29 in the First Lutheran Church, Winnipeg, a plaque in memory of the late Dr. Brandur J. Brandson was unveiled in the presence of a large congregation. On the plaque are the words: "Teacher-Physician-Surgeon-Humanitarian and a cultured Christian gentleman", followed by the quotation, "None knew thee but to love thee, nor named thee but to praise". The dedication address was given by Norman S. Bergmann, vice-president of the congregation. Dr. Brandson, who died on June 20, 1944, at the age of 70, was a great son of his native Iceland and of his adopted country, Canada. He was chief surgeon of the Winnipeg General Hospital and Professor of Surgery, University of Manitoba. In 1930 he was one of three official representatives of the Canadian